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| Application Number | 09/974,524 | | | |
| Filing Date | October 10, 2001 7 | | | |
| First Named Inventor | Stuart L. Axelson, Jr. | | | |
| Group Art Unit | 3732 | | | |
| Examiner Name | Not Yet Assigned | | | |
| Attorney Docket Number | OSTEONICS 3 0-415 | | | |

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application: A Power of Attorney or Authorization of Agent is submitted herewith. OR X Please change the correspondence address for the above-identified application to: **Customer Number** Customer Number OR Firm or Individual Name Address Zip City Telephone Fax Country I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below* X forms are submitted.



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STATEMENT UNDER 37 CFR 3.73(b)

| Applicant/Patent | Owner: Stuart L. Axelso | n, Jr. and Gearoid Walsh | | |
|---|---|--|---|--|
| Application No./P | Patent No.: 09/974, | 524 Filed/Issue Date | October 10, 2001 | |
| Entitled: <u>MET</u> | HODS AND TOOLS FOR F | FEMORAL RESECTION IN KNE | EE SURGERY | |
| Stryker 1 | Technologies Corporation | , a | Corporation | |
| | (Name of Assignee) | Type of Assignee, e.g., co | rporation, partnership, university, government agency, etc. | |
| states that it is: | | | | |
| 1. X the as | signee of the entire right, title | e, and interest; or | | |
| 2. an assignee of less than the entire right, title and interest. | | | | |
| The ex | dent (by, percentage) of its | ownership interest is | _ % | |
| in the patent appl | ication/patent identified abo | ve by virtue of either: | | |
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| [] Additional documents in the chain of title are listed on a supplemental sheet. | | | | |
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| The undersigned | (whose title is supplied belo | w) is authorized to act on behal | f of the assignee. | |
| 31 | 28)02 Date | AL ZARA | JOWSK (| |
| | Date | Турес | d or printed name | |
| | | (QQ-20) | Margar Se 5 | |
| | | | Signature | |
| | | Authorize | Signer for Assignee | |
| | | | Title . | |